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The Development of Children's Strategies for the Social Control of Emotion

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MCCOY, CHARLES L., and MASTERS, JOHN C. *The Development of Children's Strategies for the Social Control of Emotion*. CHILD DEVELOPMENT, 1985, 56, 1214-1222. It has been shown that young children can recognize emotional states in their peers, that they understand many of the antecedents of emotion, and they they are motivated to change negative emotional states in others. The present study examined children's ability to nominate strategic social action that would alter the ongoing emotional state of a peer. Children of 3 ages—5, 8, and 12 years of age—viewed a picture of a young child actually experiencing happiness, sadness, anger, or in a neutral state. In a portion of instances, information was also provided about the social or nonsocial experience that led to the target child's state. The strategies children nominated fell into a small set of agonistic (nurturant) and antagonistic (aggressive) behaviors intended to change positive or negative states. With increasing age, children tended to nominate a greater proportion of verbal strategies, social strategies (with the exception of strategies nominated to change anger), and strategies that directly addressed the cause of another's emotional state.

Over the past decade there has been increasing attention to "meta-emotion" in children: the understanding of their own feelings or the feelings of other children (Harris & Olthof, 1982; Masters & Carlson, 1984; Schwartz & Trabasso, 1984). Rarely, however, have researchers attempted to study children's strategies for intervention into other children's emotional states. This is surprising since peer interactions often elicit or modify children's emotional states (Furman & Masters, 1980), and the acquisition of effective strategies for intervention into another's emotions has important ramifications for competent social behavior and peer relations (Masters & Furman, 1981).

There is a body of research indicating that children have the necessary prerequisites for social action intended to change emotions in peers. Several studies have examined the closely related issues of *recognition* of emotion, *knowledge* of the experiential antecedents of emotion, and *motivation to change* emotional states. Felleman, Barden, Carlson, Rosenberg, and Masters (1983) found that 4-5-year-old children as well as adults are reasonably accurate in recognizing children's facial expressions of several basic emotions (i.e., happiness, sadness, anger, and neutrality). Barden, Zelko, Duncan, and Masters

(1980) found that kindergartners, third graders, and sixth graders have commonly held beliefs about the experiential origins of various affective states. For example, even preschool children believed that nurturance (e.g., being complimented by a peer) will elicit happiness, and that aggression (e.g., being hit by a peer) will produce a sad or angry reaction. Finally, Carlson, Felleman, and Masters (1983) studied children's motivation to intervene into the affective state of other children. They found that children were motivated to change the affective state in about half of the opportunities. Not surprisingly, the presence of such a motive depended on the affective state of the target child. Children judged sadness and anger to be the most changeworthy (54% and 57%, respectively), and happiness the least (39%). Children were also more motivated to intervene if they would be personally involved in effecting the change.

Given that young children can recognize emotions in other children, have common ideas about how experience influences affect, and are often motivated to intervene in others' emotional states, it is reasonable to expect that they also have common ideas on how to effect change in other children's emotions. For example, children's beliefs about the experiential antecedents of emotion (Bar-

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den et al., 1980; Camras & Allison, 1984; Harris & Olthof, 1982; Schwartz & Trabasso, 1984) may suggest intervention strategies of creating those antecedents for other children in order to change the other's emotional state (e.g., complimenting a sad child). The present study was designed to investigate the development of children's strategies for intervention into other children's affective states.

Few previous studies have addressed this specific issue. In a study of children's verbal strategies for comforting distressed peers, Burleson (1982) found that with age, children nominated a greater number and variety of such strategies and that the strategies became more sophisticated. However, this study did not address the relative frequency of verbal strategies versus other potential social intervention strategies (e.g., token giving). In a study addressing the development of children's strategies to change their own emotions, Harris, Olthof, and Terwogt (1981) found that 6-, 11-, and 15-year-old children all proposed situational modifications (e.g., "Call your friends and go play with them") as an intervention strategy, and older children also proposed strategies for modifying cognitive mediators of the emotional response (e.g., "I would try to think about something else"). It should be noted that Harris et al. (1981) did not directly address the hypothesis that strategic knowledge for intervention reflects aspects of their understanding of the causes of emotion, since the intervention-strategy categories used did not coincide with the categories of experiences that have been studied as antecedents of emotion (e.g., Barden et al., 1980). There has also been no attention in previous research to the role of information about the context or cause of another person's emotional state in the selective nomination of strategies. Frequently a child (or adult) will know the experience that elicited a peer's emotion before he or she undertakes social action to intervene into the peer's affective state. It has been found that the most effective interventions for negative states address the initial cause (Barden, Garber, Leiman, Ford, & Masters, in press), but it is not known whether children may utilize contextual information to nominate specific strategies. For example, effective interventions for a socially elicited emotion (e.g., anger resulting from another child's destruction of one's work) are likely to differ from those nominated for non-socially elicited emotions (e.g., anger resulting from a bubblegum machine not working).

The present study examined children's nomination of strategies to change the emo-

tional state of peers. The nomination of intervention strategies was examined as a function of six factors: (a) age of subject child (5, 8, and 12 years old); (b) sex of subject child; (c) type of affective cues given (expressive cues alone, expressive and social contextual cues, and expressive and nonsocial contextual cues); (d) affective state of the child targeted for intervention (happy, sad, angry, and neutral); (e) sex of target child; and (f) race of target child (white and black). The categories of proposed interventions (see Table 1) comprised a seventh factor.

Method

Subjects

Ninety-six children from kindergartens and elementary schools in a southern metropolitan area served as subjects. Thirty-two of these children, evenly distributed by sex, were from each of three grade levels: kindergarten (M age = 5-5, range 4-10 to 6-0), third grade (M = 8-4, range 7-10 to 9-1), and sixth grade (M = 12-6, range 12-2 to 12-11). The majority of subjects were white and middle class.

Stimuli

All children viewed slides of 4-5-year-old target children who were actually experiencing happiness, sadness, anger, or a neutral state. The slides were made by photographing eight children, two children of each sex (M/F) and race (B/W), as they spontaneously displayed each of the four affective states. These affective states had been elicited using a cognitive induction procedure (Rosenhan, Underwood, & Moore, 1974). The 32 slides were divided into two sets counterbalanced for sex, race, and affective state. The validity of these slides had been established previously by adult judges trained in assessing children's facial expression of affect (Masters, Barden, & Ford, 1979) as well as by children (Felleman et al., 1983). Each target child was assigned a commonly occurring name (e.g., Mary, Jim, etc.) that was used when his or her picture appeared.

For half of the children, contextual cues of emotion were provided by vignettes describing experiences that caused the emotional states (Reichenbach & Masters, 1983). For each affective state, half of the vignettes with contextual cues were social in content (e.g., anger: "Tommy had a big balloon. Another child came over to Tommy and grabbed the balloon and popped it on purpose.") and half were nonsocial in content (e.g., happy: "Anne had lost her favorite toy. Today, Anne found her favorite toy under the sofa."). The

validity of the vignettes was established on the basis of ratings by adults (Reichenbach & Masters, 1983). The order of presentation of stimuli was extensively counterbalanced.

Procedure

Equal numbers of subjects were seen individually by either a male or a female experimenter. Each subject responded to one set of 16 slides. When the first slide appeared, the experimenter said, "That's [assigned name of target child]." Then, subjects in the expressive cues with contextual cues conditions were read the vignette that had been paired with that slide. For subjects in all conditions, the experimenter then said "[Name] is really feeling [proper affect: i.e., happy, sad, 'mad,' or 'just OK']". Finally, the experimenter asked, "What could you do to make [name] not feel [affect given]?" Intervention strategies nominated were recorded on audio-cassettes for later coding.

Coding of Strategies

An intervention strategy coding system was developed such that categories met the criteria of being (a) reliably identifiable and (b) valid in light of previous research concerning children's general social interactions and their beliefs about the experiential determinants of emotion (Barden et al., 1980). The resulting classification system consisted of two superordinate intervention categories (agonism and antagonism: nurturance and aggression) and five subordinate intervention modes for each (physical, verbal, social, material, and helping/hindering) (see Table 1). There were three residual categories, two for strategies that could be classified as nurturant or aggressive but could not be classified further, and one for unscorable strategies. Table 1 lists the scoring criteria for the categories along with examples of strategies given by children that illustrate each.

The responses of a random sample of 24 subjects (equal numbers from each age group, sex, and affective cues conditions) were categorized by a second rater. The interrater agreement ranged between 80% and 100% for the intervention categories and between 50% and 70% for the residual categories. Interventions nominated when the context leading to the target child's emotional state was known

were also rated as relevant or irrelevant to the contextual cues. Interrater agreement for these ratings was 92%.

Given the free-response nature of the method, children could nominate as many intervention strategies as they wished. Children gave more than one strategy in only 5.1% of the opportunities to do so, and only two children out of 96 gave more than two strategies, each doing so for only one of the 16 stimuli to which it was possible. The analyses reported thus concern only the first strategy nominated by a child. Another rationale for this focus on first nominations was that this strategy is likely to be the most salient for the child and perhaps the first tried in actual social intervention. It is not assumed that the first strategy necessarily reflects the child's most advanced intervention strategy (Spivack & Shure, 1974).

Plan of Analysis

A seven-factor repeated-measures analysis of variance was conducted to examine the frequency of nomination for the various intervention strategies. The dependent measure was the proportion of strategies of each type nominated for the various stimuli. In addition to the six factors described earlier (age of subject child, sex of subject child, type of contextual cue, affective state of target child, sex of target child, and race of target child), the ANOVA included a seventh factor representing 13 categories of intervention strategies (Strategy). Duncan's multiple-range test was used for follow-up comparisons. Each percentage reported is the percentage of times a specific category of intervention strategy was nominated. For example, nomination of 37.5% social nurturance for altering sadness means that, of all the nominations made for altering sadness, that percentage involved some form of social nurturance. Only strategies nominated more frequently than would occur by chance are reported. Minimally significant nomination rates were derived on the basis of z tests for the difference between an observed proportion and a theoretical proportion (Freund, 1973).¹ Since there was a total of 13 categories for interventions, the theoretical proportion was based on a random nomination frequency of $1/13$, or 7.69%.

¹ For all analyses in which the class of intervention strategy was a factor, 1 *df* was dropped from the numerator in tests of F ratios because the percentages of nominations for all strategies sum to 100% (Barden et al., 1980). The Greenhouse-Geisser adjustment was also made to the degrees of freedom before assessing the significance of F 's in order to guard against any violations of the symmetry assumptions for within-subject factors (Greenhouse & Geisser, 1959). Unless stated otherwise, ANOVA effects were significant at the $p < .001$ level, and comparisons of means using Duncan's multiple-range test were significant at the $p < .05$ level or better.

TABLE 1
SCORING CRITERIA FOR INTERVENTION STRATEGY CATEGORIES

Categories	Scoring Criteria
Nurturance:	
Physical	Doing something positive to the target child's person (e.g., hugging, kissing).
Verbal	Offering reassurance, reasoning with the target child (e.g., "tell him it will pass"), trying to persuade ("tell him just to forget what happened"), talking problems over, praising, telling jokes.
Social	Inviting target child to do something (e.g., "ask her to my house"), providing an activity (e.g., "take her bowling"), playing with target child ("be his friend").
Material	Giving something to, sharing something with, buying something for.
Helping	Giving assistance, making suggestions, or doing something for target child to help him achieve goal, arbitrating a difference between target child and someone else (e.g., "I'd go tell the other kid to apologize"), repairing something broken, retrieving something lost or stolen.
Other	Any nurturant strategy not fitting into the above categories (e.g., vague nurturance: "I would cheer him up").
Aggression	
Physical	Doing something aversive to target child's person (e.g., hitting, kicking, pushing down).
Verbal	Insulting target child, calling target child names, denying verbal contact ("I wouldn't talk to her").
Social	Denying target child participation in an activity (e.g., "I wouldn't ask him to my party"; "Don't be her friend").
Material	Taking something away, not sharing with, destroying target child's property or work.
Hindering	Impeding completion of a task or achievement of a goal (e.g., "Get in his way during a race").
Other	Any aggressive strategy not fitting into the above categories (e.g., vague aggression: "I would hurt him").
Unscorable responses	Any strategy nominated that cannot be classified into a nurturance or aggression category.
No answer	No intervention strategy nominated.

Results

Generally, the effects reported will be interactions between the independent variables under experimental control (such as sex of child, age, emotion to be changed) and the factor representing the categories for nominated strategies. This is so because it makes no sense to collapse the data across the different categories of strategy (the resulting data point signifies nothing meaningful). The only exception to this occurs in the presentation of results regarding the relevance of strategies to the context provided, in which case relevance may be considered without regard to the specific strategy category. Significant interactions of four or more factors are not discussed because of interpretation difficulties.

Influence of Emotional State Targeted for Change upon Strategy Nomination

As would be expected, children's nomination of specific intervention strategies

varied as a function of the emotional state to be altered: (state to be altered $\times$ strategy category), $F(35,2808) = 40.19$. Almost without exception, nurturance strategies were nominated to alter sadness (97.9%) and anger (98.2%), and aggression strategies were nominated to alter happiness (97.4%). A mixture of aggression and nurturance was nominated to alter a neutral emotional state (45.3% aggression and 52.3% nurturance). Table 2 lists the specific strategies nominated to change each emotional state.

Developmental Differences in Children's Strategy Nomination

There were systematic differences in the strategies nominated by 5-, 8-, and 12-year-old children (age $\times$ strategy category), $F(23,936) = 3.30$, $p < .01$. There was a marked increase with age in the nomination of verbal nurturance, a less pronounced increase in helping nominations, and a slight decrease in

TABLE 2

FREQUENCIES OF PREFERRED EMOTION-CONTROL STRATEGIES AS A FUNCTION OF THE EMOTION TARGETED FOR CHANGE

Emotion Targeted and Strategy	%
Happy:	
Material aggression	24.2
Physical aggression	17.7
Social aggression	17.5
Verbal aggression	15.4
Sad:	
Social nurturance	37.5
Material nurturance	26.8
Helping	17.2
Angry:	
Material nurturance	31.5
Helping	23.4
Social nurturance	19.8
Neutral:	
Social nurturance	26.0
Material nurturance	12.0
Other aggression	10.2

NOTE.—Strategies listed are those nominated most frequently at or above chance level.

the nomination of material nurturance. Specifically, 12-year-old children nominated verbal nurturance (14.3%) more frequently than did younger children (4.3% for 8-year-olds, and 1.4% for 5-year-olds). Twelve-year-olds also nominated helping interventions more frequently (14.1%) than did younger children (8.8% for 8-year-olds and 9.4% for 5-year-olds). Contrariwise, 5-year-old children nominated material nurturance more often (24.6%) than did older children (15.2% for 8-year-olds and 12.9% for 12-year-olds).

Not surprisingly, the influence of age on strategy nomination was qualified by the emotional state to be altered (age $\times$ state to be altered $\times$ strategy category), $F(71,2808) = 2.55$. Table 3 lists the strategies most frequently nominated for each emotional state by children within each age group.

In general, this interaction reflected the tendency for older children to nominate fewer material interventions and more social and verbal interventions than did the 5-year-olds, with the superordinate category of the intervention (i.e., whether it was nurturant or aggressive) depending on the positive or negative valence of the emotional state being altered. For example, 12-year-olds nominated verbal aggression to change happiness at greater than chance levels, but 8- and 5-year-olds did not. Also, 12- and 8-year-olds

TABLE 3

FREQUENCIES OF PREFERRED EMOTION-CONTROL STRATEGIES AS A FUNCTION OF THE EMOTION TARGETED FOR CHANGE AND AGE OF CHILD

Emotion Targeted, Age, and Strategy	%
Happy:	
5 years:	
Material aggression	26.6
Social aggression	20.3
Physical aggression	19.5
8 years:	
Social aggression	23.4
Material aggression	21.9
Physical aggression	21.1
12 years:	
Verbal aggression	29.7
Material aggression	24.2
Sad:	
5 years:	
Material nurturance	36.7
Social nurturance	25.8
Helping	18.8
8 years:	
Social nurturance	44.5
Material nurturance	21.9
Helping	18.8
12 years:	
Social nurturance	42.2
Material nurturance	21.9
Verbal nurturance	19.5
Angry:	
5 years:	
Material nurturance	43.8
Social nurturance	21.1
Helping	18.0
8 years:	
Material nurturance	29.7
Social nurturance	26.6
Helping	16.4
12 years:	
Helping	35.9
Verbal nurturance	23.4
Material nurturance	21.1
Neutral:	
5 years:	
Material aggression	18.0
Material nurturance	18.0
Social nurturance	17.2
8 years:	
Social nurturance	24.2
Social aggression	11.7
12 years:	
Social nurturance	36.7
Verbal nurturance	14.1

NOTE.—Strategies listed are those nominated most frequently at or above chance level.

nominated social nurturance more frequently as a strategy to alter sadness than did 5-year-olds, and 12-year-olds nominated social nurturance as an intervention for neutrality more often than did 8- or 5-year-olds. To change anger, however, 12-year-olds nominated helping interventions. Finally, 5-year-olds nominated material aggression more often as an intervention for neutrality than did older children.

Further analyses were conducted to examine age changes in the general material and verbal mode of intervention regardless of nurturant or aggressive nature. These analyses revealed an age effect for both material and verbal strategies: (age), $F(2,93) = 5.26$, $p < .05$, and (age), $F(2,93) = 19.45$, $p < .001$, respectively. The frequency of material strategies decreased with age (35.7% for 5-year-olds, 22.1% for 8-year-olds, and 19.7% for 12-year-olds), while that of verbal strategies increased (4.1%, 9.6%, and 23.4%, respectively).

Role of Expressive and Contextual Information in the Nomination of Intervention Strategies

Types of strategies.—Children's preferences for intervention strategies were influenced by whether they knew the cause of the emotional state to be changed and, when they did know the cause, by its social or nonsocial nature (contextual cues $\times$ strategy category), $F(23,936) = 8.81$, $p < .01$. In general, children proposed interventions that focused on the cause of the target child's emotional state when there was contextual information available. For example, children nominated social nurturance strategies more often for socially caused emotional states (18.0%) than for the states having a nonsocial context (10.7%).

Children nominated social aggression more frequently when the emotional state was socially induced (10.2%) than when they did not know the context (7.0%) or when the emotional state resulted from a nonsocial experience (1.3%). Physical and material aggression strategies were clearly differentiated by the children. Physical aggression was nominated more often when the cause of the emotional state was unknown (10.9%) than when the cause was social (2.6%) or nonsocial (2.6%), while material aggression was nominated to address specifically nonsocial causes (17.7%) rather than social causes (4.2%) or when there was no causal information given (5.6%).

It is interesting that, for nonsocial antecedents, children nominated more helping

(22.4%) than they did for social contexts (13.3%) or in the absence of contextual information (3.7%). This finding may be an artifact of the common nonsocial contexts for negative affect, which include failure (sadness), frustration (anger), or ineffectiveness of other sorts.

Finally, in the absence of contextual cues, children nominated more social nurturance strategies (27.3%) than when social contextual cues were given (18.0%). This suggests that while children are sensitive to contextual information, they have a general preference for social nurturance as an intervention strategy to remediate negative states no matter what the specific cause.

The strategies children nominated to change specific emotional states were influenced by the type of contextual information available (contextual cues $\times$ state to be altered $\times$ strategy category), $F(71,2808) = 9.00$, $p < .01$. Table 4 presents the strategies nominated most frequently to change each emotional state when contextual information was given.

Basically, this interaction was due to differences in the nomination of certain strategies to remediate anger. While social nurturance was typically nominated to change emotional states having a social cause, as reported above, children tended not to nominate social nurturance to remediate anger when any type of causal information was available. In fact, this strategy was nominated far less for anger having a social origin (5.2%) and for anger having a nonsocial origin (4.2%) than for anger having an unknown cause (34.9%). Children instead preferred material nurturance and helping as strategies. Children nominated material nurturance more frequently for socially induced anger (41.7%) and for anger with a nonsocial context (40.6%) than for anger having an unknown cause (21.9%). Helping was nominated most frequently for nonsocial anger (50.0%), next most often for social anger (26.0%), and least for anger with an unknown context (8.9%).

Influence of Personal Characteristics on Strategy Nomination

Sex of subject.—Boys' and girls' strategy nominations did not differ significantly (sex of child $\times$ strategy category), $F(11,936) = 1.38$, N.S. Furthermore, sex of subject did not interact with any other factor. Children of both sexes apparently had similar consensuses regarding strategies for the control of other children's emotions.

TABLE 4

FREQUENCIES OF PREFERRED EMOTION-CONTROL STRATEGIES AS A FUNCTION OF THE EMOTION TARGETED FOR CHANGE AND THE TYPE OF CAUSAL CONTEXT

Emotion Targeted, Causal Context, and Strategy	%
Happy:	
None:	
Physical aggression	30.2
Other aggression	18.8
Social aggression	18.8
Nonsocial:	
Material aggression	59.4
Hindering	21.9
Social:	
Social aggression	30.2
Verbal aggression	22.9
Hindering	17.7
Sad:	
None:	
Social nurturance	44.8
Material nurturance	30.2
Nonsocial:	
Helping	38.5
Material nurturance	35.4
Social nurturance	15.6
Social:	
Social nurturance	44.8
Helping	19.8
Verbal nurturance	12.5
Angry:	
None:	
Social nurturance	34.9
Material nurturance	21.9
Verbal nurturance	16.7
Nonsocial:	
Helping	50.0
Material nurturance	40.6
Social:	
Material nurturance	41.7
Helping	26.0
Other nurturance	12.5
Neutral:	
None:	
Social nurturance	29.7
Material nurturance	14.1
Physical aggression	13.0
Nonsocial:	
Social nurturance	22.9
Material nurturance	14.6
Other nurturance	12.5
Social:	
Social nurturance	21.9
Other aggression	15.6
Verbal aggression	12.5

NOTE.—Strategies listed are those nominated most frequently at or above chance level.

Sex and race of target.—Children’s nomination of strategies was influenced by the combination of the target’s sex and race (target sex $\times$ target race $\times$ strategy category), $F(11,936) = 2.32, p < .05$. Children nominated more material aggression strategies for white female target children (10.7%) than for white males (6.5%), while target sex did not influence the nomination of material aggression for black targets. Other strategies contributing to this interaction were nominated with frequencies that did not exceed chance. Thus, in general, there were no pervasive or generalized effects of target child’s sex or race.

Relevance of Strategies

A six-factor analysis of variance (age of subject child $\times$ sex of subject child $\times$ type of contextual cues $\times$ target affect $\times$ target sex $\times$ target race) was conducted to examine the relevance of strategies to contextual cues. This analysis revealed a significant age effect, $F(2,36) = 4.42, p < .05$. The strategies nominated by the older children were significantly more likely to address the context (87.1% for 12-year-olds and 82.8% for 8-year-olds) than were those nominated by the youngest children (67.1%). Despite a clear developmental progression of children’s increasing sensitivity to contextual determinants, it is noteworthy that even the 5-year-old children gave strategies that were sensitive to the context in more than half the instances. There was also a significant main effect for the particular emotion to be altered (state to be altered), $F(3,108) = 35.43, p < .001$. Children’s strategies tended to address the context most for changing anger, less for changing happiness and sadness, and least for changing neutral states, especially if the neutral state was associated with a material context (state to be altered $\times$ cues), $F(3,108) = 6.13, p < .01$.

Discussion

Factors Influencing the Nomination of Strategies for the Social Control of Emotion

Almost without exception, children nominated strategies that were appropriate to the emotional state to be altered. Thus, children nominated strategies for changing clearly positive emotional states to a negative state, clearly negative states to positive, and a neutral state to positive or negative. In addition, when children of all ages were told the antecedents of the target child’s emotional state, they generally proposed interventions that were consistent with those antecedents. For example, children nominated more social

strategies when a social interaction (e.g., not being picked for a game) had led to the emotional state than they did when the emotion was caused by a nonsocial event (e.g., losing a favorite toy).

There is some indication that this reflects a naive wisdom. Barden et al. (in press) found that the most effective remediation for a negative effective state was a reversal of the experience or cognition that brought it about in the first place. It is important to note that the strategies nominated in the present study were the first that children thought of. Thus, they may not reflect deeper, more considered implicit theories of emotional responding that children might have and that would be reflected in the strategies they would nominate subsequently or after time to think. This is an issue that merits study in its own right, especially if the focus is to be on children's maximal competence in this regard. On the other hand, if strategic knowledge is related to actual social interventions that children undertake, those that are spontaneously generated initially may be the ones most likely to guide action. The present findings suggest that even the very first strategies that children nominate are responsive to contextual information in a way that would promote the selection of effective interventions.

Developmental Differences in Control Strategies

In general, there was a shift with age from material intervention strategies to strategies involving verbal intervention or helping the target child. These differences are consistent with the increased cognitive and social sophistication of the older children. For example, the developmental increase in verbal interventions probably reflects the increasing efficiency of children's verbal communication from kindergarten through the fifth grade (Krauss & Glucksberg, 1969) and the increasing number, variety, and sophistication of strategies for comforting communication (Burleson, 1982). As verbal communication becomes an efficient means of social exchange, verbal intervention is likely to be seen as an increasingly potent tool for achieving desired ends, such as altering others' emotional states.

The predominance of material nurturance as an intervention strategy for the youngest children may reflect the importance of material exchange in early childhood social interactions. Very young children have been found to use object sharing or giving as a means of initiating and maintaining social interactions (Rheingold, Hay, & West, 1976).

The general developmental changes found in the present study are consistent with the progression in children's strategies for the self-control of emotion noted by Harris et al. (1981), though a different system of categories was used. Harris et al. found a shift with increasing age from strategies involving manipulating one's external situation to an inclusion of strategies for manipulating the internal, cognitive mediators of one's emotional state. In the present study, the strategies of younger children focused on aspects of the target child's situation that could be altered (e.g., material interventions such as "I would give her some toys"), while those of older children also included attempts to influence the target child's cognitive processes that mediate between the situation and the emotional reaction (e.g., verbal interventions such as "Tell him it's not worth thinking about"). This suggests that children's strategies for the control of emotion are generalized and may reflect a developing understanding or implicit theory of emotion processes that characterize one's own emotional responsiveness as well as that of others.

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